

**Spring City Music and Market Festival  
Vendor Application  
September 27, 2014**

Contact Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Items Being Sold: \_\_\_\_\_

Special Requirements/Requests: \_\_\_\_\_

\_\_\_\_\_

**Fees:**

Non-profit .....	Free
Spring City Borough Vendor/Business .....	Free
Non-Spring City Borough Vendor/Business ..	\$25.00

**Instructions:**

1. Please submit forms to:  
Gene Sweeney  
420 Washington Street  
Spring City, PA 19475
2. Make checks payable to Spring City Music Festival.
3. Food vendors must have Chester County Health Department License.
4. The event is rain or shine.
5. There are no refunds for fees.
6. Electricity is limited. Please let us know your requirements and we will do our best to work with you.
7. Each vendor space is approximately 12' x 12'. We do not supply tables or chairs. If you need extra space, please indicate above.
8. Spaces are first come, first served - so please submit early!
9. Festival times are 10AM - 4PM. Setup begins at 8AM. Please be setup by 9:45AM.
10. For additional information please email: [sweeneyspringcity@gmail.com](mailto:sweeneyspringcity@gmail.com).